

Protective equipment: It's a lifesaver

"I realized that I was alive...because the equipment I was wearing prevented further catastrophic injuries."

— Master Sgt. Richard Burnette

**By Master Sgt. Richard Burnette
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The blast knocked me down and killed four Iraqi kids who happened to be in the wrong place at the wrong time.

Lying on the ground on my back, I turned my head to the left and saw the bloody and lifeless body of one of them, a little Iraqi boy. His eyes were still open and they were fixed on me, a moment I will never forget. His life had been snuffed out by an unknown and evil suicide bomber. My driver, Sgt. John Williams, my gunner Staff Sgt. Kenneth Buff, and a gunner from the trail vehicle, Sgt. Ladelle Nettles, also sustained injuries from the blast along with approximately 17 Iraqi civilians.



U.S. Army photo

Master Sgt. Richard Burnette interacts with the Iraqi children while trying to maintain a defensive position.

Baghdad, May 1, 2005

The day had started off like any other. I got up at about 0500 hours, worked out, showered, had breakfast and prepared to leave the Forward Operating Base (FOB) with the battalion commander, Lt. Col. S. Jamie Gayton, as part of the unit's personal security detachment. My NCOs and I conducted our pre-combat inspections on our Soldiers to ensure we were prepared for our mission. We were going that morning to Zafaraniya on the southern side of Baghdad. As we departed the



U.S. Army photo

gate I heard the battalion sergeant major, Command Sgt. Maj. Gregory Watkins, calling to the Tactical Operations Center (TOC) over the radio to report our departure from the FOB, but the TOC failed to respond to his repeated attempts to communicate. As the battalion's operations sergeant, I got a little upset that the TOC wasn't responding, so I picked up the radio's handset, removed my left earplug in order to hear clearly and called the TOC myself to report the departure. What seemed like a routine mission changed my life forever.

Arriving at our destination we pulled just off the road and parked our four vehicles in a line formation for easy access back onto the road if necessary. It was a densely populated residential neighborhood with houses on each side of a busy street with heavy traffic, as well as children and other pedestrians. Once stopped, everyone exited their vehicles and took defensive positions. I exited my vehicle and I moved to the rear of the vehicle to provide flank security. As I approached my position, several Iraqi children came running up to me, most likely hoping for food, money or whatever they could get from us.

In order to keep an adequate safety perimeter, I instructed the children to leave the area. They did briefly, but returned shortly afterward.

Grinding gears and a big blast

I had my back to the road while I was looking around and dealing with the kids. From behind I heard the grinding gears of vehicle that sounded like it was downshifting. I turned to see a small car moving directly behind me whose driver had already started into a U-turn approximately 5- to 10-feet away. My gunner and I realized almost instantly that something wasn't right about this maneuver. The gunner spun his turret toward the vehicle and I raised my rifle to fire, but the driver detonated his vehicle before either of us could get off a shot.

The explosion was extremely loud and powerful. I stumbled backwards a few steps and tried to collect my senses. My ears

were ringing badly, but I thought I had somehow managed to survive this attack uninjured.

Then my legs gave out and I fell onto my back. I opened my eyes, and I could see the little Iraqi boy to my left. He was about 9- or 10-years-old, just a little younger than my own son, and now he was gone.

At that point, I remember worrying about snipers being in the area and taking a shot at me, so I started to crawl toward my vehicle for cover. I didn't get very far when Watkins pulled me to the vehicle. He checked on the other Soldiers and established local security around the blast site.

When Gayton got to my location with our medic, Sgt. Carolyn Thompson, I distinctly remember the colonel telling me, "I'm going to get you out of here, master sergeant."

I then heard someone say "get a tourniquet on him," and it was then I realized I had not been as lucky as I originally thought. Thompson secured my tourniquet on my left arm. The surgeon who operated on me said I would have bled to death had it not been for the speed and accuracy in which she applied my tourniquet.

Within about 17 minutes of the explosion the unit had us back at the FOB being treated. Within about one hour I was stabilized and receiving Level III care at the 86th Combat Surgical Hospital (CSH) in the International Zone on the other side of Baghdad. After two days I was transported to Landstuhl Regional Medical Center, Germany, where I remained for four days. I didn't wake up until I was at the Intensive Care Unit at Walter Reed Army Medical Center in Washington, D.C.

At the time I couldn't remember any of these details, but later learned of all of my surgeries and the medical care I had received. My entire body was wrapped in bandages and my neck was in a brace. It was then that I learned just how seriously I had been injured. My right thumb had been blown off by the blast and left thumb had been surgically removed at the CSH because it was beyond repair. My left arm was fractured in three places, and the median and radial nerves also were severely injured. My left elbow was completely shattered and I had taken shrapnel to both thighs and to my left hip. I lost hearing in my left ear as my eardrum had been totally blown out, and I had nerve damage to my right foot.

For several weeks I laid in the hospital bed trying to cope with everything that had happened to me. Sometimes I felt very lucky to be alive and glad it was me and not one of my Soldiers lying there. Other times I felt somewhat sorry for myself and downright angry this had happened. One day I got a visit from someone from the Physical Therapy (PT) Clinic and another from the Occupational Therapy (OT) Clinic. They had come to start me on my journey through rehabilitation treatment.

For the first week they conducted their treatment at my bedside. It was very painful, but I knew it had to be done. A few days into the treatments, my physical therapist told me he wanted me to stand. I agreed to give it a try and after some initial unsuccessful attempts I finally stood for about 10 seconds. It wasn't



U.S. Army photo

Master Sgt. Richard Burnette, far left, and an unidentified Soldier speak with Sgt. Maj. of the Army Kenneth O. Preston on June 16, 2005 at Walter Reed Army Medical Center while celebrating the hospital's 100th birthday.

long afterwards that he started taking me to the PT clinic for my therapy.

In the clinic

My first time in the clinic was initially distressing. The place was full of Soldiers with missing limbs and other injuries. The reality of this war was staring me right in the face. Everyone in that room was suffering from his or her own brand of misery. I felt sorry for them and my initial instinct as an NCO with more than 20 years in service was to get up and help them. The problem was I could not yet walk. As I sat there watching these Soldiers working very hard on their therapy, I was impressed with their tenacity. They were not quitting or feeling sorry for themselves; they were coping with their afflictions and working hard to rehabilitate themselves. It inspired me to work very hard over the next few weeks at rehabilitating myself.

Lifesavers: Training and equipment

Before too long I was up walking around the hospital with the help of a walker. My body was beginning to recover, but at night I would lie in bed and think about the day I was hit. I would go over it time and time again in my head.

I thought about all the events leading up to that moment and about all my training and my unit's training. One thing eventually became clear to me – there was nothing I or anyone else in the chain of command could have done to prevent the attack. We were simply a target of opportunity for the enemy.

It was clear to me the battalion had done all it could to prepare the personal security detachment for this mission. More importantly, I realized that I was alive, not only because of the unit's response in treating me and getting me to a medical facility, but because the equipment I was wearing prevented further catastrophic injuries at the time of the blast. There were several key pieces of equipment that helped to save my life.

Ear protection

Finally, there were my earplugs. I remembered that I had forgotten to put my left earplug back after calling the TOC. My right ear was not injured because I had the earplug in, but the left eardrum was completely destroyed. The Combat Arms Earplugs are now standard issue for Soldiers serving in combat zones.

I thought about the hundreds of times in my career I had corrected Soldiers for not wearing their earplugs, and now I had lost hearing in my left ear because of a mental mistake and for not following the SOP to have both earplugs in at all times.

It's for your own protection: Wear it!

The bottom line is this: I'm alive and reasonably well because these five items work as they were intended to and were critical in helping save my life. There were many times in my career, especially when I was a younger Soldier, where I questioned the decision of my chain of command to lug around so much equipment. It seemed so unnecessary and just a way for the unit to harass the Soldier. But now I am a believer, and I'm here as proof that these protection measures were well thought out.

I have now recovered from most of my injuries and am hoping to stay on active duty. If allowed to stay, one of the areas I will focus on is using my experience to teach young Soldiers the value of using their protective equipment and using it properly. The Army takes tremendous strides to provide us with vast amounts of protective gear. It is the responsibility of all leaders to ensure Soldiers are trained on this equipment, the standards are enforced and lives are saved.



The ear protection and one-armed tourniquet are pictured to the left. The ear plug prevents injuries; while the tourniquet helps keep Soldiers alive.



SAPIs and DAPs

The most obvious one was the Small Arms Protective Inserts (SAPI) I was wearing. Without them I would have taken so much shrapnel to my chest that I would have died instantly.

Another was my Deltoid (shoulder/arm) and Axillary (armpit/underarm) Protection (DAP). While the blast did extensive damage to my left arm, the DAP provided enough protection to prevent the profunda brachial artery, which is in the upper arm, from being completely severed. Such a wound could have led to a full-limb amputation or perhaps to uncontrollable bleeding.

Ballistic eyewear

Another item that was vital in protecting me during this attack was my ballistic goggles, the Wylie-X PT-1 Ballistic Shields. Without them I would be, at the very least, visually impaired and, at worst, completely blind. In fact, there are pieces of shrapnel still embedded in my face, including at least two fragments just above my left eye and on the bridge of my nose close to my left eye socket. If I had not been wearing my goggles, the blast would have – without question – altered my eyesight for the rest of my life.

One-handed tourniquet

Next is the one-handed tourniquet. The one-handed tourniquet (Combat Application Tourniquet) Thompson used that morning was much easier and quicker to apply than the old method. I believe that she was able to prevent me from bleeding to death and saved my left arm because of that tourniquet. When I did my research on the tourniquet I learned that “extremity hemorrhage continues to be the leading cause of preventable death on the battlefield. The recommended means to control bleeding in a tactical environment while under fire is a rapidly applied tourniquet.”

What the Soldier wears or carries onto the battlefield is a product of PEO Soldier which was created to ensure that Soldiers are second to none when it comes to mission accomplishment. See the related story on the next page.

